

# TRANSMITTAL FORM

Application Serial Number	10/660,444
Filing Date	September 11, 2003
First Named Inventor	Chanduszko
Group Art Unit	3734
Examiner Name	Andersen, Michael T.
Attorney Docket No.	NMT-015
Confirmation No.	4893

## ENCLOSURES (check all that apply)

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form (1 pg.)<br><input checked="" type="checkbox"/> Check attached in the amount of \$180.00<br><input type="checkbox"/> Copy of Fee Transmittal Form<br><br><input type="checkbox"/> Amendment/Response<br><input type="checkbox"/> Preliminary<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]<br><br><input type="checkbox"/> Petition for Extension of Time<br><br><input checked="" type="checkbox"/> Supplemental Information Disclosure Statement (2 pgs.)<br><input checked="" type="checkbox"/> Form PTO-1449 (1 pg.)<br><input checked="" type="checkbox"/> Copy of IDS Citation (B17)<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Sequence Listing submission<br><input type="checkbox"/> Paper Copy/CD<br><input type="checkbox"/> Computer Readable Copy<br><input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application<br><br><input type="checkbox"/> Formal Drawing(s)<br><br><input type="checkbox"/> Request For Continued Examination (RCE) Transmittal<br><br><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application<br><br><input type="checkbox"/> Small Entity Statement<br><br><input type="checkbox"/> CD(s) for large table or computer program<br><br><input type="checkbox"/> Amendment After Allowance<br><br><input type="checkbox"/> Request for Certificate of Correction<br><input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences<br><br><input type="checkbox"/> Appeal Brief (in triplicate)<br><br><input type="checkbox"/> Status Inquiry<br><br><input checked="" type="checkbox"/> Return Receipt Postcard<br><br><input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 (1 pg.)<br><br><input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8<br><br><input type="checkbox"/> Additional Enclosure(s) (please identify below) |
|---|---|---|

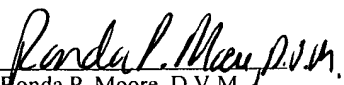
## CORRESPONDENCE ADDRESS

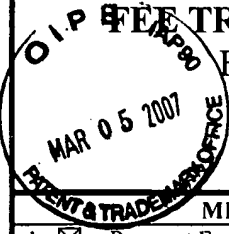
Direct all correspondence to: Patent Administrator  
Kirkpatrick & Lockhart Preston  
Gates Ellis LLP  
State Street Financial Center  
One Lincoln Street  
Boston, MA 02111-2950  
Tel. No.: (617) 261-3100  
Fax No.: (617) 261-3175

## SIGNATURE BLOCK

Date: March 1, 2007  
Reg. No. 44,244  
Tel. No.: (617) 261-3167  
Fax No.: (617) 261-3175

Respectfully submitted,

  
Ronda P. Moore, D.V.M.  
Attorney for the Applicants  
Kirkpatrick & Lockhart Preston  
Gates Ellis LLP  
State Street Financial Center  
One Lincoln Street  
Boston, MA 02111-2950

		Complete if Known	
		Application Serial Number	10/660,444
		Filing Date	September 11, 2003
		First Named Inventor	Chanduszko
		Group Art Unit	3734
		Examiner Name	Andersen, Michael T.
		Attorney Docket No.	NMT-015
		Confirmation No.	4893

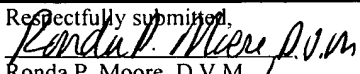
  

<p><b>METHOD OF PAYMENT</b></p> <p>1. <input checked="" type="checkbox"/> Payment Enclosed:  <input checked="" type="checkbox"/> Check   <input type="checkbox"/> Money Order   <input type="checkbox"/> Other</p> <p>2. <input type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-1721.  <input type="checkbox"/> Required Fees (copy of this sheet enclosed).  <input type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17.  <input type="checkbox"/> Overpayment Credit.</p> <p>3. <input type="checkbox"/> Applicant claims small entity status.</p>	<p><b>FEE CALCULATION (continued)</b></p> <p><b>3. ADDITIONAL FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr> <tr><td>120</td><td>60</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>450</td><td>225</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1020</td><td>510</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1590</td><td>795</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>2160</td><td>1080</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>500</td><td>250</td><td>Notice of Appeal</td><td></td></tr> <tr><td>500</td><td>250</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1000</td><td>500</td><td>Request for oral hearing</td><td></td></tr> <tr><td>400</td><td>400</td><td>Petitions to the Commissioner (Gp. I)</td><td></td></tr> <tr><td>200</td><td>200</td><td>Petitions to the Commissioner (Gp. II)</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner (Gp. III)</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Supplemental Information Disclosure Statement</td><td>180.00</td></tr> <tr><td>790</td><td>395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>790</td><td>395</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr> <tr><td>130</td><td>65</td><td>Submission of Terminal Disclaimer</td><td></td></tr> <tr><td colspan="2">Other fee (Specify)</td><td></td><td></td></tr> <tr><td colspan="2">Other fee (Specify)</td><td></td><td></td></tr> </tbody> </table>	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		120	60	Extension for reply within first month		450	225	Extension for reply within second month		1020	510	Extension for reply within third month		1590	795	Extension for reply within fourth month		2160	1080	Extension for reply within fifth month		500	250	Notice of Appeal		500	250	Filing a brief in support of an appeal		1000	500	Request for oral hearing		400	400	Petitions to the Commissioner (Gp. I)		200	200	Petitions to the Commissioner (Gp. II)		130	130	Petitions to the Commissioner (Gp. III)		180	180	Submission of Supplemental Information Disclosure Statement	180.00	790	395	Filing a submission after final rejection (37 CFR 1.129(a))		790	395	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		130	65	Submission of Terminal Disclaimer		Other fee (Specify)				Other fee (Specify)			
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																										
130	65	Surcharge - late filing fee or oath																																																																																											
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																											
130	130	Non-English specification																																																																																											
2,520	2,520	Request for ex parte reexamination																																																																																											
120	60	Extension for reply within first month																																																																																											
450	225	Extension for reply within second month																																																																																											
1020	510	Extension for reply within third month																																																																																											
1590	795	Extension for reply within fourth month																																																																																											
2160	1080	Extension for reply within fifth month																																																																																											
500	250	Notice of Appeal																																																																																											
500	250	Filing a brief in support of an appeal																																																																																											
1000	500	Request for oral hearing																																																																																											
400	400	Petitions to the Commissioner (Gp. I)																																																																																											
200	200	Petitions to the Commissioner (Gp. II)																																																																																											
130	130	Petitions to the Commissioner (Gp. III)																																																																																											
180	180	Submission of Supplemental Information Disclosure Statement	180.00																																																																																										
790	395	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																											
790	395	For each additional invention to be examined (37 CFR 1.129(b))																																																																																											
100	100	Certificate of Correction for applicant's error																																																																																											
130	65	Submission of Terminal Disclaimer																																																																																											
Other fee (Specify)																																																																																													
Other fee (Specify)																																																																																													

<p><b>FEE CALCULATION</b></p> <p><b>1. FILING/SEARCH/EXAM/SIZE FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>300</td><td>Utility filing fee</td><td></td></tr> <tr><td>500</td><td>Utility search fee</td><td></td></tr> <tr><td>200</td><td>Utility exam fee</td><td></td></tr> <tr><td>250</td><td>Utility size fee (each add'l 50 pgs. over 100)</td><td></td></tr> <tr><td>200</td><td>Design filing fee</td><td></td></tr> <tr><td>100</td><td>Design search fee</td><td></td></tr> <tr><td>130</td><td>Design exam fee</td><td></td></tr> <tr><td>250</td><td>Design size fee (each add'l 50 pgs. over 100)</td><td></td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Number Filed</th> <th>Number Extra</th> <th>Rate</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>- 20 =</td> <td></td> <td>x \$ 50.00 =</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td>- 3 =</td> <td></td> <td>x \$200.00 =</td> <td></td> </tr> <tr> <td colspan="4"> <input type="checkbox"/> Multiple Dependent Claim(s), if any      \$360.00 = </td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: right;">(\$ ) 0.00</td> </tr> </tbody> </table>		Large Entity Fee (\$)	Fee Description	Fee Paid	300	Utility filing fee		500	Utility search fee		200	Utility exam fee		250	Utility size fee (each add'l 50 pgs. over 100)		200	Design filing fee		100	Design search fee		130	Design exam fee		250	Design size fee (each add'l 50 pgs. over 100)			Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =		x \$ 50.00 =		Independent Claims	- 3 =		x \$200.00 =		<input type="checkbox"/> Multiple Dependent Claim(s), if any      \$360.00 =					TOTAL:					SMALL ENTITY DISCOUNT:					SUBTOTAL (1)				(\$ ) 0.00	<p><b>2. AMENDMENT CLAIM FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Claims Remaining After Amend.</th> <th>Highest No. Previously Paid For</th> <th>Present Extra</th> <th>Rate</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total</td> <td>-</td> <td>=</td> <td>x \$ 50.00 =</td> <td></td> </tr> <tr> <td>Indep.</td> <td>-</td> <td>=</td> <td>x \$200.00 =</td> <td></td> </tr> <tr> <td colspan="4"> <input type="checkbox"/> First Presentation of Multiple Dep. Claim      + \$360.00 = </td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td style="text-align: right;">(\$ )</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td style="text-align: right;">(\$ )</td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (2)</td> <td style="text-align: right;">(\$ ) 0.00</td> </tr> </tbody> </table>	Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total	-	=	x \$ 50.00 =		Indep.	-	=	x \$200.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim      + \$360.00 =					TOTAL:				(\$ )	SMALL ENTITY DISCOUNT:				(\$ )	SUBTOTAL (2)				(\$ ) 0.00
Large Entity Fee (\$)	Fee Description	Fee Paid																																																																																																	
300	Utility filing fee																																																																																																		
500	Utility search fee																																																																																																		
200	Utility exam fee																																																																																																		
250	Utility size fee (each add'l 50 pgs. over 100)																																																																																																		
200	Design filing fee																																																																																																		
100	Design search fee																																																																																																		
130	Design exam fee																																																																																																		
250	Design size fee (each add'l 50 pgs. over 100)																																																																																																		
	Number Filed	Number Extra	Rate	Amount																																																																																															
Total Claims	- 20 =		x \$ 50.00 =																																																																																																
Independent Claims	- 3 =		x \$200.00 =																																																																																																
<input type="checkbox"/> Multiple Dependent Claim(s), if any      \$360.00 =																																																																																																			
TOTAL:																																																																																																			
SMALL ENTITY DISCOUNT:																																																																																																			
SUBTOTAL (1)				(\$ ) 0.00																																																																																															
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid																																																																																															
Total	-	=	x \$ 50.00 =																																																																																																
Indep.	-	=	x \$200.00 =																																																																																																
<input type="checkbox"/> First Presentation of Multiple Dep. Claim      + \$360.00 =																																																																																																			
TOTAL:				(\$ )																																																																																															
SMALL ENTITY DISCOUNT:				(\$ )																																																																																															
SUBTOTAL (2)				(\$ ) 0.00																																																																																															

<p><b>CORRESPONDENCE ADDRESS</b></p> <p>Direct all correspondence to:</p> <p style="margin-left: 40px;">Patent Administrator  Kirkpatrick &amp; Lockhart Preston  Gates Ellis LLP  State Street Financial Center  One Lincoln Street  Boston, MA 02111-2950  Tel. No.: (617) 261-3100  Fax No.: (617) 261-3175</p>	<p><b>SIGNATURE BLOCK</b></p> <p>Date: March 1, 2007  Reg. No.: 44,244  Tel. No.: (617) 261-3167  Fax No.: (617) 261-3175</p> <p style="text-align: right;">Respectfully submitted,    Ronda P. Moore, D.V.M.  Attorney for the Applicants  Kirkpatrick &amp; Lockhart Preston  Gates Ellis LLP  State Street Financial Center  One Lincoln Street  Boston, MA 02111-2950</p>
--	--



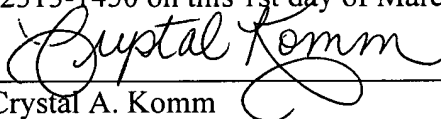
PATENT  
Attorney Docket No. NMT-015

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Chanduszko et al. CONFIRMATION NO.: 4893  
SERIAL NO.: 10/660,444 GROUP NO.: 3734  
FILING DATE: September 11, 2003 EXAMINER: Andersen, Michael T.  
TITLE: SEPTAL PUNCTURE DEVICE

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any documents referred to as enclosed herein, are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 1st day of March, 2007.

  
Crystal A. Komm

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

1. Transmittal Form (1 page);
2. Fee Transmittal Form (1 page);
3. Check in the amount of \$180.00;
4. Supplemental Information Disclosure Statement (2 pages);
5. Supplemental Form PTO-1449 (1 page);
6. Copy of Cited IDS Reference (B17); and
7. a return receipt postcard.

BOS-1060062 v1



PATENT  
Attorney Docket No. NMT-015

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Chanduszko *et al.* CONFIRMATION NO.: 4893  
SERIAL NO.: 10/660,444 GROUP NO.: 3734  
FILING DATE: September 11, 2003 EXAMINER: Andersen, Michael T.  
TITLE: Septal Puncture Device

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with the provisions of 37 C.F.R. 1.97 and 1.98, Applicants hereby make of record the publication listed on the accompanying Form PTO-1449, and other information contained herein, for consideration by the Examiner in connection with the examination of the above-identified patent application. A copy of the non-U.S. patent document is enclosed.

REMARKS

In accordance with the provisions of 37 C.F.R. 1.97, this statement is being filed (CHECK ONE):

- ☐ (1) within three (3) months of the **filing date** of a national application other than a continued prosecution application under 37 C.F.R. 1.53(d), or within three (3) months of the **date of entry of the national stage** as set forth in 37 C.F.R. 1.491 in an international application, or before the mailing of the **first Office action** on the merits, or before the mailing of a **first Office action** after the filing of a request for continued examination under 37 C.F.R. 1.114; or
- ☐ (2) after the period defined in (1) above but before the mailing date of any of a **final action** under 37 C.F.R. 1.113, a **notice of allowance** under 37 C.F.R. 1.311, or an action that otherwise closes prosecution in the application, and
- ☐ the requisite Statement is below, **OR**
- ☐ the requisite fee under 37 C.F.R. 1.17(p), namely **\$180.00**, is included herein; or

- ☒ (3) after the period defined in (2) above but before the payment of the **issue fee**,  
**AND**
- ☒ the requisite Statement is below, **AND**
- ☒ the requisite petition fee under 37 C.F.R. 1.17(p), namely **\$180.00** is included herein.

It is respectfully requested that each of the patents and publications listed on the attached Form PTO-1449, and other information contained herein, be made of record in this application.

### STATEMENT


As required under 37 C.F.R. 1.97(e), Applicant(s), through the undersigned, hereby state either that [**check the appropriate space only if either (2) or (3) is checked on the previous page and the Statement is required**]:

- ☐ 1. Each item of information contained in the Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application **not more than three months** prior to the filing of the Information Disclosure Statement; or
- ☒ 2. No item of information contained in the Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing this certification after making reasonable inquiry, no item of information contained in the Information Disclosure Statement was known to **any individual** designated in 37 C.F.R. 1.56(c) **more than three months** prior to the filing of the Information Disclosure Statement.

Respectfully submitted,

Date: March 1, 2007  
Reg. No. 44,244

Tel. No.: (617) 261-3167  
Fax No.: (617) 261-3175

  
\_\_\_\_\_  
Ronda P. Moore, D.V.M.  
Attorney for Applicants  
Kirkpatrick & Lockhart Preston Gates Ellis LLP  
State Street Financial Center  
One Lincoln Street  
Boston, Massachusetts 02111-2950

<b>FORM PTO - 1449</b> <b>INFORMATION DISCLOSURE STATEMENT</b>				<b>ATTORNEY DOCKET NO.:</b> NMT-015 <b>APPLICANT(S):</b> Chanduszeko <b>SERIAL NO.:</b> 10/660,444 <b>FILING DATE:</b> September 11, 2003 <b>GROUP NO.:</b> 3734 <b>CONFIRMATION NO.:</b> 4893			
---	--	--	--	---	--	--	--

OFFICE  
 MAR 05 2007  
 PATENT & TRADEMARK OFFICE

U.S. PATENT DOCUMENTS							
EXAM. INIT.	DOCUMENT NUMBER	DATE	NAME	CLASS	SUB CLASS	FILING DATE IF APPROPRIATE	

FOREIGN PATENT DOCUMENTS									
EXAM. INIT.	DOCUMENT NUMBER	DATE	COUNTRY CODE	CLASS	SUB CLASS	FILING DATE	ABSTRACT ONLY	ENGLISH LANG (Y/N)	
	B17	WO95/13111	05/18/95	PCT					Y

OTHER ART, JOURNAL ARTICLES, ETC.		
EXAM. INIT.	OTHER DOCUMENTS: (Including Author, Title, Date, Relevant Pages, Place of Publication)	

<b>EXAMINER</b>	<b>DATE CONSIDERED</b>
-----------------	------------------------